ZUUS FUR PRUFFI CURPURATION ANNUAL REPORT **FILED** DOCUMENT # P03000036466 May 02, 2005 08:00 AN Entity Name MITCHELL DRYWALL, INC. Secretary of State Principal Place of Business Mailing Address 7030 BRIDLEWOOD LANE 7030 BRIDLEWOOD LANE PENSACOLA, FL 32526-9133 PENSACOLA, FL 32526-9133 04292005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEi Number Applied For 06-1687877 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent MITCHELL, SYLVIA A DO NOT WRITE 7030 BRIDLEWOOD LANE PENSACOLA, FL 32526-9133 IN THIS SPACE \$. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Ragistered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME MITCHELL, SYLVIA A 7030 BRIDLEWOOD LANE STREET ADDRESS CITY-ST-7IP PENSACOLA, FL 325269133 mu MAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY- ST-ZIP NAME STREFT ADDRESS DITY-ST-ZIP STREET ADDRESS CITY-ST-71P I hereby cartify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Horida Statutes; and that my name appears in Block 10 or Block 11 if